

REQUEST FOR PROPOSAL

Addendum # 1



Department Of Executive Services
Finance and Business Operations Division
Procurement and Contract Services Section
206-684-1681 TTY RELAY: 711

DATE ISSUED: October 3, 2005

RFP Title:	Co-Occurring Disorders Residential Treatment for King & Pierce Counties
Requesting Dept./ Div.:	King County Department of Community & Human Services – MHCHDS
RFP Number:	144-05CMB
Due Date:	November 3, 2005 - 2:00 P.M.
Buyer:	Cathy Betts, cathy.betts@metrokc.gov (206) 263-4267

This addendum is issued to revise the original Request for Proposal, dated September 8, 2005 as follows:

1. The proposal opening date remains the same: Thursday, November 3, 2005 no later than 2:00 p.m. exactly.
2. The sign in sheet from the September 22, 2005 pre-proposal conference is available by contacting Cathy Betts at cathy.betts@metrokc.gov. Please include your FAX number,

The following information items were discussed at the pre-proposal conference and questions that were addressed:

Listed below is the web address for the Washington State Residential Treatment Facility WAC:
<http://www.leg.wa.gov/WAC/index.cfm?fuseaction=chapterdigest&chapter=246-337>

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TO BE ELIGIBLE FOR AWARD OF A CONTRACT, THIS ADDEMDUM MUST BE SIGNED AND SUBMITTED TO KING COUNTY

Sealed proposals will only be received by:
King County Procurement Services Section, Exchange Building, 8th floor, 821 Second Avenue, Seattle, WA 98104-1598. Office hours: 8:00 a.m. - 5:00 p.m., Monday - Friday

Company Name

Address		City / State / Postal Code
Signature	Authorized Representative/Title	
Email	Phone	Fax

This Request for Proposal – Addendum will be provided in alternative formats such as Braille, large print, audiocassette or computer disk for individuals with disabilities upon request.

Q1: I am writing to ask that you amend the requirements for RFP 144-05CMB to include much stronger protections for neighborhoods and for participants in this program once they are placed in community housing. In my reading of the RFP, I see no requirements of the successful bidders to address these placement issues.

A1: *Housing placement remains a challenge for clients entering treatment including changes in residential needs due to the movement from residential treatment to outpatient treatment. Although requirements and issues vary within King County and Pierce County, both counties agree that housing which supports the client's abstinence from drugs and alcohol is essential. Housing placement requirements are better addressed in the contract negotiations between the successful bidder and each county. All placements into housing shall address the needs of the client and the needs of the community where the client will live. It is anticipated that the successful bidder will work to assure that the standards, as established by each County, are addressed.*

Q2: Does the contract include accepting offenders?

A2: *In King County, only drug court referrals and non-violent clients will be included as referrals for treatment. In Pierce County, clients are referred through the criminal justice treatment system. Sex offenders are not eligible this program in either county.*

Q3: Is the contract with single a provider only?

A3: *There will be one provider that will be offered a contract with Pierce County and contract with King County. The provider could be a consortium of service agencies represented by a single entity able to sign a contract with each respective county.*

Q4: Do you have demographic information of clients? How many are enrolled in the mental health system? How about Title XIX eligibility?

A4: *Clients will be adults (age 18 or older) and may be of any gender, race, ethnicity or culture.*

Clients may or may not be enrolled or eligible for services with either the King County mental health system or Pierce County mental health system. The number of clients who would be referred for co-occurring disorder residential treatment enrolled in the mental health system is unknown. If a referred client is enrolled in either county's mental health system, then the selected bidder is expected to work with the appropriate mental health system to coordinate treatment services.

Many of the clients may be eligible for benefits through the Title XIX Medicaid system; it anticipated that initially most will not have completed the necessary work for enrollment in benefits.

Q5: What's the legal status of a client? Can a client leave the facility voluntarily?

A5: *The client will be involved with the courts or criminal justice system, but the client will not normally be involved with Involuntary Treatment Services as defined in RCW 70.96A. It is not the intent of this RFP to result in a contract with a secured facility.*

Q6: Is the funding coverage from June 30, 2005 through June 30, 2007?

A6: *Yes. The estimated funding available is approximately \$1,000,000 for the period ending June 30, 2007.*

Q7: How much is the reimbursement per bed day?

A7: The reimbursement is consistent with Division of Alcohol and Substance Abuse's bed day rates. We have negotiated a bed day rate more than \$180 per bed day. It is hoped that a vendor rate increase will increase the rate beginning July 1, 2006.

Q8: Is the program to be co-ed?

A8: Yes.

Q9: What is meant by emergent medical condition?

A9: For the purposes of this RFP, emergent medical conditions are those conditions that require immediate medical attention. The medical condition, as an example, may be the result of prolonged substance abuse, or a medical condition that is not apparent prior to admission, and the treatment of the condition is necessary for the individual to remain in or return to chemical dependency treatment.

Q10: Do you want a separate budget for start up or prepare an annual budget?

A10: The submitter should submit a start-up budget, and separate budget for the first year of operation.

Q11: On expected outcome on page 12, are clients admitted at the facility needing to be detoxed?

A11: Detoxification of clients will be completed in either the King County contracted detoxification service provider or the Pierce County contracted service provider prior to intake at the treatment facility.

Q12: What about the length of stay for a client?

A12: American Society of Addiction Medicine Patient Placement Criteria will be used to determine the clients appropriate length of stay.

Attached is a letter that was handed out at the Pre-Proposal meeting from the Washington Department of Health Construction Review Services also.

Dear Valued Client,

Construction Review is committed to helping applicants meet the many complex building rules that must be followed to meet state, local and sometimes federal codes and standards. We highly recommend that facilities contact us at the inception of a project to discuss which rules apply to their specific project. The rules that will apply will affect the life safety systems provided in the building. The life safety system may include sprinkler requirements, fire alarm requirements, type of construction, smoke control, compartmentation, emergency lighting and almost always will include analysis of the path of egress. The design of the life safety system is determined based on many factors such as patient mobility, occupancy risk, and patient density. These factors in turn will dictate what level of safety must be provided in a building for the occupants to remain safe during emergencies.

In existing building this poses a potential problem that may greatly influence costs for conversions. Generally, the less flexibility the patient has to move about and leave the facility on their own accord, whether restrained or impaired, the more life safety systems that have to be provided to ensure a level of safety for emergency personal to provide rescue services. Also, the structure size may depend on use of the facility which also greatly affects rescue personal operations.

The Building Code separates buildings into different categories called occupancies, which may also include several sub categories and depend on the use of the building. When a building is initially built, it is approved for one of those specific uses, any change in those uses will void the buildings Certificate of Occupancy and must be resubmitted to your local authority having jurisdiction (building official) for review and approval. Construction Review will work closely with the local building official to ensure that everyone completely understands the intended use of the building.

The building code provides for many exceptions and alternate materials and method options that CRS plan review staff strive to make you, our customer, aware of. Early construction review involvement is imperative to take advantage of as many options as possible. Our goal is to provide as much value as possible to each project.

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